

City of Menomonie

City Hall 800 Wilson Avenue Menomonie, WI 54751 715 232 2187

www.menomonie-wi.gov

APPLICATION FOR DOWN PAYMENT ASSISTANCE

Email this completed application to renee.swenson@cedarcorp.com or Mail to: City of Menomonie – 800 Wilson Avenue, Menomonie, WI 54751

The information on this form will be used to determine your eligibility for Down Payment Assistance Programs of the City of Menomonie. Your information is kept confidential. The undersigned applicant/applicants first duly sworn on oath deposes and says:

adiy sworn on oddi dep	roses and says:				
Name of Applicant:	(First)	(Middle)	(Last)		
Spouse/co-applicant: [
	(First)	(Middle)	(Last)		
Current Address:					
		(City, State)	(Zip Code)		
Home Phone:		Work Phone:			
INCOME INFORMATION: Please list below all persons who live in your household. List the incomes of all					

INCOME INFORMATION: Please list below all persons who live in your household. List the incomes of all persons 18 years of age or older. Income means any amount received or expected in the next 12 months from any source: salaries, commissions, bonuses, overtime, tips, public assistance, unemployment, pensions, trusts, rental income, alimony or child support, gains from sale property, Social Security, SSI, AFDC, etc.

ANTICIPATED ANNUAL INCOME					
Family Members	Wages/Salaries	Employer	Hire Date	Other Income	
Totals	A. \$			B. \$	Total
Enter the total of items from A. and B. This is Annual Income:				\$	

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Have you found a house you wish to purchase?		
YES Address:		
NO If NO, what is the timeframe within which y	ou would like to acquire a home?	
Name of financial institution through which the ho	me will be financed:	
Are you pre-approved for a loan?		
YES – Attach a copy of your commitment	letter	
NO		
Where did you hear about Home Sweet Menomoni	e?	
Employer		
Billboard		
Friend		
Banker		
Realtor		
Other		
HOUSEHOLD VERIFICATION: I/We certify that th the home purchased under the program.	e following person/persons are or will	be residing in
Household Members and Age:		
Applicant Signature	Date of Application	
Co-Applicant Signature	Date of Application	



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GENERAL AUTHORIZATION

,	onie to verify my present employment enomonie down-payment assistance loan is only to be used in the processing of this
Signature of Applicant	Date
Signature of Co-Applicant	Date